### STATE OF NEW HAMPSHIRE

# 2018 Statement of Income and Expenses

for LOBBYISTS (RSA Chapter 15)

RECEIVED

JUL 2 0 2018

NEW HAMPSHIRE

#### PLEASE PRINT

Darryl W. Perry

1. Name of Lobbyi	ist(s)			DEPARTMENT OF S
II. Name of lobby	ist's partnership, firm or coi	poration, if an	y:	
Liberty Lobby	LLC			
	Name of partnership, firm or corp			· <u>·</u>
63 Emerald S	t #369	Keene	NH	03431
Business Address:	(Street)	(Town/City)	(State)	(Zip Code)
(603) 835 3257	·		e-mail darryl@	libertylobby.info
(Telephon	e)	(Fax)		
III. This statement reportable expense	t covers: (Choose one – file s e transactions which are not	eparate reports attributable to	s for each client, OR you many one client).	ay file a separate report fo
All reportable to	ransactions occurring in the m	onths prior to th	e reporting date relative to th	e following client:
Liberty Lobby	LLC			
0.5	(Full Name of Client as it ap	pears on the Lob	byist Registration Form)	
OR  All reportable to unrelated to any particular desired to any parti	unsactions by the lobbyist (inc rticular client	luding the lobb	yist's family), or the lobbying	; firm listed below which are
IV. Date of Report	4 April 25, 2018 🗍		July 25, 2018	
Reports cover: ac	ctivity from date of registration to	0 3/3 1/1 8	activity from 4/1/18 to 6/30/18	
	October 31, 2018		January 30, 2019 🗆	
	activity from 7/1/18 to 9/30/1	5	activity from 10/1/18 to 12/31/	78
	een no fees received and n ed, complete just this form and l.			
VI. Check if additi	ional reports are attached:			
	eived fees or made expenditur	es, vou must fik	Addendum A- Fees and Ex	Denses
	d an honorarium or reimburse			-
•	m, or your family has made po	litical contribut	ions, you must file Addendui	m C- Political Contribution
I have read RSA 15	Affirmation by Lobbyist , RSA 15-B, RSA 14-C and R	SA 664 and here	eby swear or affirm that the fo	oregoing information is true
and complete to the	best of my knowledge and be	nct.	7/10/10	
(Signature of lamby	ien	_	7/18/18	
7			(Dute	•)
Darryl W. Perr	<del></del>			
Print Name of lobb	byist)			

## L E A S P R N 1

P

## STATE OF NEW HAMPSHIRE

## Lobbyists Fees and Expenses Addendum A



(RSA Chapter 15:6)

Darnyl W. Borny	
1. Name of Lobbyist(s) Darryl W. Perry	
II. Name of lobbyist's partnership, firm or corporation, if any:	
Liberty Lobby LLC	
(Name of partnership, firm or corporation)	
III. Name of Client Liberty Lobby LLC	Date7/18/18
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greeduced by any expenses:	relations, or public relations service
a) Total of all fees received in this reporting period	a) \$\$733.94
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year).	b) \$ \$1,181.57 ear)
c) Total of all fees received to date (Add lines a and b)	c) \$\$1,915.51
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lessing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm e aggregate total of all expenses pair expenses; (b) the aggregate total of all le: meals purchased during a business as than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25, purchase of a er than \$25, but not greater than \$50, expense reimbursement, or political ed on Addendum A.
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$\$733.94
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
e) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$\$733.94
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$\$1,181.57
f) Total of all expenses year to date	ns \$1,915.51
V1. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
	7/18/18
(Signature of lobbyist)	(Date)
Darryl W. Perry	

(Print Name of lobbyist)



# STATE OF NEW HAMPSHIRE

**Lobbyists Report of Political Contributions** Addendum C (RSA Chapter 15:6)

RECEIVED

JUL 2 0 2018

I. Name of Lobbyist(s) _	Darryl W. Pei	rrv	JUL 2 0 2018
			NEW HAMPSHIRE DEPARTMENT OF ST
11. Name of lobbyist's p	partnership, firm or cor	poration, if any:	DEL ARTIMENT OF CO.
Liberty Lobby LLC			
(Name of	partnership, firm or corporation)		<del></del>
III. Name of Client	iberty Lobby LLC	Date	7/18/18
Duttatant Conservation			
Political Contributions For each political contri		pursuant to RSA Chapter 664 p	aid on bahalf of the
client/lobbyist and lobb	ying firm, indicate the fol	llowing:	and off bettart of the
	Libertarian Party		
Full name of candidate:	(Last Name)	(First Name) (Mi	ddle Name/Initial)
	30		n/a
Amount of contribution \$		Office Candidate is Secking	
Full name of candidate:		Vermin	
	(Last Name) 31.32	•	kdle Name/Initial)
Amount of contribution \$	31.32	Office Candidate is Seeking _	Kansas AG
If the contribution is an in-			
actual cost of the in-kind c	ontribution on the line abov	t description of the goods or service for amount of contribution. If th	es provided, and enter the
actual cost of the in-kind c	ontribution on the line abov		es provided, and enter the
actual cost of the in-kind c enter an estimated value ar	ontribution on the line aboved the word "estimate."  Phinney	e for amount of contribution. If th	es provided, and enter the e actual cost is not known.
	ontribution on the line aboved the word "estimate."	e for amount of contribution. If th	es provided, and enter the

Full name of candidate:	Dyer	Caleb	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ _	12.34	Office Candidate is	Sceking NH State Rep
If the contribution is an in- actual cost of the in-kind ec- enter an estimated value an-	ontribution on the line abo	e a description of the good ove for amount of contribu	s or services provided, and enter the tion. If the actual cost is not known
(If more than three contribution	ns were made, report additio	nal contributions on separate	addendum C forms,)
(If more than three contribution		nal contributions on separate	addendum C forms.)
Sworn Statement/Affirm	nation by Lobbyist	nd hereby swear or affin	addendum C forms.) m that the foregoing information
Sworn Statement/Affirm	nation by Lobbyist	nd hereby swear or affin	
Sworn Statement/Affirm	nation by Lobbyist	nd hereby swear or affin	m that the foregoing information
Sworn Statement/Affirm I have read RSA 15, RSA is true and complete to th	nation by Lobbyist	nd hereby swear or affin	m that the foregoing information 7/18/18

.

.